

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         |          |        |         |
| O.I.P.E. CLASSIFIER       | RSD      |        | 4-18-00 |
| FORMALITY REVIEW          |          |        | 1-21-01 |
| RESPONSE FORMALITY REVIEW | MP       | 10303  | 10-11   |

### INDEX OF CLAIMS

Rejected  
 Allowed  
 Canceled  
 Restricted  
 (Through numeral)  
 Non-elected  
 Interference  
 Appeal  
 Objected

| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

BEST AVAILABLE COPY

(LEFT INSIDE)